

**HEALTH ACCORD NL**  
**TOWN HALL MEETING (ZOOM)**  
**MARCH 10, 2021, 7 P.M.**

On behalf of the RSAC, we attended the “Virtual” Town Hall meeting on Health Accord NL on March 10, 2021, with Co-Chairs, Sister Elizabeth Davis and Dr. Pat Parfrey, as the presenters. More than 100 persons attended this meeting. This was one of 14 Town Hall meetings held throughout the Province. .

**Background:** **Health Accord NL** is a 10 year plan to transform health care in our Province. Phase 1 is the current phase which is responsible for the creation of the plan by the end of Year 1. (An Interim Report will be provided in April 2021. A Final Report will be delivered in December 2021.) Phase 2 deals with the plan implementation over a period of four years (Year 2 to Year 5). Phase 3 is the final phase which will deal with the evaluation of the plan outcomes during years 6 to 10.

Charts and information provided indicated that our Health Care is based on a system developed 50 years ago and is seriously out of date (statistical charts re changing demographics, current issues).. Note: The emphasis is on “Health” in comparison to “Health Care”. There is a need for integration of all parts of the Health Care System – doctors, nurses, nurse practitioners, para-medics, allied health care professionals. Currently, they are, for the most part, working separately. The professional associations are working with Health Accord NL. A new “business model” is necessary.

Vision for Health Accord NL

1. Increase awareness of and interventions in the social factors that influence health (social determinants of health).
  
2. Balance community-based (primary health care, elder care, social care) and hospital-based services. Public engagement is a priority in shaping the agenda. Six strategies are intended to implement that agenda. Each strategy is headed by a committee with Chair.

Social Determinants of Health  
Community Care  
Hospital Services  
Aging Population  
Quality Health Care  
Digital Technology

These six areas of study are supported by an Indigenous Advisory Group, Community Sector Circle, Key Informant Groups and Engagement Group.

Public engagement is a priority in shaping and implementing the agenda. Town Hall meetings are part of engaging and seeking public input on Phase 1 of the project (Creation of the Plan).

Of particular interest to RSAC is the naming of "Social Determinants" as one of the key elements within the whole area of Health: poverty; food insecurity; shelter; socio-economic and environmental factors. Social spending has been "flat" for 40 years, whereas spending on health care has increased significantly. Increased social spending could reduce the demands on the health care system. Much of the health and mental care is "crisis" oriented – long term solutions are necessary.

Health Accord NL is advocating the use "Health in all policy approach". Every policy decision should ask a question, whose health is going to benefit from this initiative similar to the common practice of using economic lens (how much it is going to cost?).

That is, "health" should be considered in all aspects of government policies and programs.

(Of particular interest here is the RSAC foci on a Fairness Prism – Fairness Impact Study – this could be shared as a 'sampler' for illustration and feed-back).

There was a lively, worthwhile discussion/question time with the following points being made:

- Bring health to individuals rather than bringing individuals to health – clinics in smaller communities.
- 60 to 80% of persons who visit Emergency Clinics are not emergencies.
- Make more and better use of para-medics.
- What do "diversity" and "inclusion" mean today?
- Social determinants (poverty, food and housing) were emphasized.

This was a most informative and worthwhile event for us to attend on behalf of RSAC. There is a number of opportunities for partnership and cooperation.

Haseen Khan; George Powell  
Directors, RSACNL